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# Fax

<b>To:</b>	USPTO: GAU 2684	<b>From:</b>	C. Douglass Thomas, ph. 408.446.3333
<b>Fax:</b>	703.872.9306	<b>Pages:</b>	9 (including this page)
<b>Phone:</b>		<b>Date:</b>	12/8/2004
<b>Re:</b>	10/826,531	<b>CC:</b>	

☒ **Urgent**    ☐ **For Review**    ☐ **Please Comment**    ☐ **Please Reply**    ☐ **Please Recycle**

**• Comments:**

Transmitted herewith for filing is: (1) an Amendment Transmittal (1 page); (2) Credit Card Payment Form; and (3) a Preliminary Amendment (pp. 1-6).

DEC 08 2004

**PATENT****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: CHEUNG et al.

Attorney Docket No.: IPVBP003

Application No.: 10/826,531

Examiner:

Filed: April 15, 2004

Group: 2684

Title: DIRECTIONAL SPEAKER FOR  
PORTABLE ELECTRONIC DEVICE**CERTIFICATE OF FACSIMILE**

I hereby certify that this correspondence is transmitted via facsimile to: Commissioner for Patents, Alexandria, VA 22313-1450 on December 8, 2004.

Signed: 

Printed Name: C. Douglass Thomas

**AMENDMENT TRANSMITTAL**Mail Stop  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.  
The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	25	MINUS	20	5	x 25 = 125.00	x 25 = 0.00
Independent Claims	4	MINUS	3	1	x 100 = 100.00	x 200 = 0.00
Multiple Dependent Claim Present and Fee Not Previously Paid					\$145.00	\$290.00
Total					\$ 225.00	\$0.00

- ☐ Applicant(s) hereby petition for a \_\_\_\_ month extension(s) of time to respond to the aforementioned Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 500388.
- ☒ Enclosed is our Credit Card Payment Form in the amount of \$ 225.00 to cover the additional claim fee and/or extension of time fees.
- ☒ Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 500388 (Order No. RLC1G000).

Respectfully submitted,

C. Douglass Thomas  
Reg. No. 32,947

Ph: (650) 903-9200

DEC 08 2004

PATENT

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CERTIFICATE OF FACSIMILE

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Signed: \_\_\_\_\_

  
C. Douglass Thomas

**PRELIMINARY AMENDMENT**

Mail Stop \_\_\_\_\_  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Prior to an Office Action on the merits, please amend the above-identified as follows:

**Amendments to the Claims** are reflected in the listing of claims which being on page 2 of this paper.

**Remarks/Arguments** begin on page 6 of this paper.

12/09/2004 LWONDIH1 00000039 10826531

01 FC:2201	100.00 OP
02 FC:2202	125.00 OP

10/826,531

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IPVBP003